## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

INSTRUCTIONS. This form should be used for transmining the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriates All further correspondence including the Parent, advance orders and nonfication of manners are will be mailed to the current conespondence including the parent, advance orders and nonfication of manners are discovered below.

for any other accompa	f mailing can only be used for the certificate cannot be used t	Note: A certificate of Fee(s) Transmittal. To		erh corulto ot migrare)	E APPRESS (Nurc. Ues Block 1 for a	rowani redektzbriethie
ent or formal drawing	e ot maijne or nansmusion al paper, such as an assignme	papers. Each addition	IDA		59X) 09/27/2005	±3797 75
			216			MILLER THOM
smission g deposited with the L	ruficate of Mailing or Trans his Fee(s) Transmitted is being	I hereby certify that the	极	) /	ET WEST, SUITE 2500	
st class mail in an env	his Fee(s) Transmittal is being with sufficient postage for fir it Stop ISSUE FEE address PTO (371) 273-2885, on the o	States Pustal Service addressed to the Ma	<b>A</b>	1		TORONTO, ON M
taxe noticated below.	PTO (571) 273-2885, on the o	transmitted to the USI	C 2 2 2005	( DE		CANADA
(Depusitro			بي	6 湯	050 502385 1073662	5 TBESHAH2 000000
(5.02	- · · · · · · · · · · · · · · · · · · ·		PADEMANN DIVE	(Azi	DA	700.00 I
			HADEMAN			300.00 I
CONFIRMATION N	ATTORNEY DOCKET NO	ST NAMED INVENTOR			FILING DATE	APPLICATION NO
4085	56836 07/EIG	aday	Terrence Joseph Cas		12/17/2003	10/736,626
					EVER ARM WITH TACTIL	
DATE DUE	TOTAL PEE(S) DUE	BLICATION FEE	FE P	ISSUE F	SMALL ENTITY	APPLN. TYPE
12/27/2005	\$1000	\$300	,	\$700	YES	nonprovisional
		ASS-SUBCLASS	irT c	ART U	INER	EXAM
		297-301100	•	3636	êy barnett	white, rodn
	rst	the patent front page, b	2 For printing on	e Address" (37	r address or indication of "Fe	hauge of correspondence
ne J.A. Gier	nt attorneys I <u>Euger</u>	p to 3 registered pater	(I) the names of			R 1 363).
			or agents OR, alto	-оптекронденев	eace address (or Change of C 22) attached.	Lidres form PTO/SB/17
	e member a 🛂					
	acs of up to	ingle fifm (having 25 a	registered attorne			
	acs of up to	Or agent) and the nam allormeys or agents. If	registered attorne	tion form	ion (or "Fee Address" Indicat is more recent) attached. Use	Fee Address" indican
	acs of up to	or agent) and the name attorneys or agents. If it be printed.	registered amonie 2 registored pater listed, no name w	non form of a Customer	non (or "Fee Address" Indicat in more recent) attached. Use	"Fee Address" indicate YO/SB/47, Rev 03-02 of wanter is required.
ocument has been file	ino name is 3	or agent) and the nam attorneys or agents. If it be printed or type)	registered attorne 2 registered pateit listed, no name w THE PATENT (print	tion form of a Customer PRINTED ON	non (or "Fee Address" Indicate in more recent) attached. Use	1"Fee Address" indicate 10/513/47, Rev 03-02 o Number is required. SSIGNEE NAME AND
locument has been file	nes of up to a name is 3	or agent) and the nam attorneys or agents. If it be printed or type)	registreed anomic 2 registered pater listed, no name with PATENT (print data will appear on I a substitute for film	non form of a Customer  PRINTED ON  low, no assignee of this form is NO	ion (or "Fee Address" Indicated unors recent) attached. Use  RESIDENCE DATA TO BE an assigned to identified bel 37 CFR 3.11. Completion of	1"Fee Address" indicate 10/513/47, Rev 03-02 o Number is required. SSIGNEE NAME AND
locument has been file	nee is identified below, the di	or signify and the name affurneys or agents if it be printed or type.  or ty	registered attorned 2 registered pater histed, no name with the PATENT (print data will appear on I a substitute for film it processes the processes of the pro	tion form of a Customer  PRINTED ON  Ow, no assignee of this form is NO  (E	ion (or "Fee Address" Indicated union recent) attached. Use RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of	I "Fee Address" indicate PIO/SB47, Rev 03-02 o Namber is required. SSIGNEE NAME AND PLEASE NOTE: Unless occurring as set forth at A) NAME Or ASSIGNE
	nee is identified below, the di UNTRY)  ON Canada	or sgent) and the namellumers or agents if it be printed or type) the patent if an assign an assignment Y and STATE OR COL SSISSAUGA, C	registred attorned 2 registred pater histed, no name w first Pater (print data will appear on I a substatute for film () RESIDENCE. (CT. Mi	tion form of a Customer  PRINTED ON  How, 40 assignee of this form is NO  (E	ion (or "Fee Address" Indicated upon recent) attached. Use  RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of	I "Fee Address" indican PIO/Sik47, Rev 03-02 o Number is required. SSIGNEE NAME AND PLEASE NOTE: United SCOULDION as set forth as A) NAME OF ASSIGNE CGO-Industria
	nee is identified below, the di	or sgent) and the namellumers or agents if it be printed or type) the patent if an assign an assignment Y and STATE OR COL SSISSAUGA, C	registred attorned 2 registred pater histed, no name w first Pater (print data will appear on I a substatute for film () RESIDENCE. (CT. Mi	tion form of a Customer  PRINTED ON  low, no assignee of this form is NO  (F	ion (or "Fee Address" Indicate in unors recent) attached. Use  RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of	I "Fee Address" indican PIO/Sik47, Rev 03-02 o Number is required. SSIGNEE NAME AND PLEASE NOTE: United SCOULDION as set forth as A) NAME OF ASSIGNE CGO-Industria
	nee is identified below, the di UNTRY)  ON Canada  Outporation of other private gre	or sgent) and the namellumers or agents if it be printed or type) the patent if an assign an assignment Y and STATE OR COL SSISSAUGA, C	registered attorner 2 registered pater thisted, no name w PHE PATENT (print data will appear on T a substante for film to RESIDENCE. (CI Mi inited on the patent). Payment of Fee(s):	tion form of a Customer  PRINTED ON  How, 40 assignee of this form is NO  (E)  Ems Inc.  The (will not be property)	ion (or "Fee Address" Indicated upon recent) attached. Use  RESIDENCE DATA TO BE an assigner to identified bel an ASSIGNER TO Completion of  EP  AL Seating Syste  assigner catagory or category enclosed	I "Fee Address" indican PIO/SB47, Rev 03-02 o Number is required.  SSIGNEE NAME AND DLEASE NOTE: Unless econdation as set forth at A) NAME OF ASSIGNE TO THE COMMENT OF ASSIGNE CONTROL OF A SPECIAL PROPERTY OF THE FOLLOWING FOR SPECIAL PROPERTY OF THE FOLLOWING
	nee is identified below, the di UNTRY)  ON Canada  orporation or other private gre telosed.	or signify and the name afformers or agents if the printed or type) are patent if an assignment of the state of type and state of type and state of type and state of the stat	registered attorner 2 registered pater 4 registered pater 4 registered pater 4 registered pater 4 registered on the pater 5 registered at the patern) 6 Payment of Fee(s):  A check in the 3	tion form of a Customer  PRINTED ON  How, 40 assignee of this form is NO  (E)  Ems Inc.  The (will not be property)	ion (or "Fee Address" Indicate in unors recent) attached. Use  RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of	I "Fee Address" indican PIO/SB47, Rev 03-02 o Number is required.  SSIGNEE NAME AND DLEASE NOTE: Unless econdation as set forth at A) NAME OF ASSIGNE TO THE COMMENT OF ASSIGNE CONTROL OF A SPECIAL PROPERTY OF THE FOLLOWING FOR SPECIAL PROPERTY OF THE FOLLOWING
оыр епиту . 🚨 Govern	nee is identified below, the di UNTRY)  ON Canada orporation or other private gre ticlosed.  Is a stacked.	or sgent) and the name afformers or agents if the printed or type) are patent if an assignment of the second of type and STATE OR COLORS SSISSAUGA, Colors of the fee(s) is entered form PIO-2038	registered attorner 2 registered pater histed, no name w PHE PATENT (print data will appear on T a substante for film b) RESIDENCE. (CI  Mi inited on the patent). Payment of Fee(s):  A check in the a Payment by cred	tion form of a Customer  PRINTED ON  How, 40 assignee of this form is NO  (E)  Ems Inc.  The (will not be property)	ion (or "Fee Address" Indicated the more recent) attached. Use RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of EP.  LI Seating System assigner category or category and category or category and lentify discount permitted mail entity discount permitted.	I "Fee Address" indican PIO/SB47, Rev 03-02 o Number is required.  SSIGNEE NAME AND DLEASE NOTE: Unless econdation as set forth at A) NAME OF ASSIGNE TO THE COMMENT OF ASSIGNE CONTROL OF A SPECIAL PROPERTY OF THE FOLLOWING FOR SPECIAL PROPERTY OF THE FOLLOWING
credit any overpayme opy of this form)	nee is identified below, the di UNTRY)  ON Canada orporation or other private gre included.  So attached tharge the required fee(s), or (chelose an extra co	or signify and the name afformers or agents if the printed or type.  To type.  The patent if an assign an assign an assignment  Y and STATE OR CO.  Individual C. C.  Individual C. C.  Lount of the fee(s) is entered from PIO-2038  Actropy authorized by contered by authorized by contered to the fee contered authorized by contents authorized aut	registered attorner 2 registered patient 2 registered patient histed, no name w  THE PATENT (print data will appear on I a substaute for film  Payment of Fec(s):  A check in the a  Payment by cred The Director is Deposit Account No	tion form of a Customer  PRINTED ON  Own, no assignee of this form is NO  (E  EMS Inc.  The (will not be property)	ion (or "Fee Address" indicated in more recent) attached. Use  RESIDENCE DATA TO BE an assigned to identified bel 37 CFR 3.11. Completion of EP  LI Seating System assigned designed category or category enclosed intil entity discount permitted Copies	The Address indicate Ploysite A Rev 03-02 of Namber is required.  SSIGNE NAME AND PLEASE NOTE: Unless secondation as set forth at A) NAME OF ASSIGNE COOLING THE PROPERTY OF THE FOLLOWING FEC(S) are explained for fector of the following fec(s) are explained for following fec(s) are explained for following fec(s) are explained for fector of the following fec(s) are explained for fector of the following fec(s) are explained for fector of the fector
credit any overpayme opy of this form)	nee of up to no name is 3  nee is identified below, the delivery)  ON Canada  orporation or other private greatelesed.  It is a stached  tharge the required fee(s), or (enclose an extra column of the column of th	or signify and the name attention or agence if a structure or type)  the patient if an assign a assignment of the STATE OR COLUMN SSISSAUGA, Column of the fee(s) as entered form PIO-2038 and the structure of the fee of the structure of the	registred anone 2 registred patent listed, no name w the PATENT (print data will appear on T a substante for film inted on the patent) Payment of Fee(s): A check in the a Payment by cred The Director is Deposit Account No	tion form of a Customer  PRINTED ON  Row, no assignee of this form is NO  (E)  PMS Inc.  The (will not be purely form of the pu	ion (or "Fee Address" indicated in more recent) attached. Use  RESIDENCE DATA TO BE an assigned to identified bel 37 CFR 3.11. Completion of EP  11. Seating System is assigned to the second control of the second control	The Address indicate Ploysia 47, Rev 03-02 of Namber is required.  SSIGNE NAME AND PLEASE NOTE: Unless secondation as set forth at A) NAME OF ASSIGNE COOLING TO ASSIGNE For following fee(s) are explained for fee and the following fee(s) are explained for fee and publication fee (No single Advance Order - # of family Status (et al. Applicant claims SNAME (al. Appli
credit any overpayme opy of this form)  FR 1 27(g)(2).	nee is identified below, the di UNTRY)  ON Canada orporation or other private gre included.  So attached tharge the required fee(s), or (chelose an extra co	or signify and the name attention or agence if a structure of type)  the patient of an assign a sasignment of the STATE OR CO.  SSISSAUGA, C.  Individual C. C.  Lount of the fee(s) is entered of the structure of the fee(s) and card. Form PIO-203th other 502385  Longer Claiming SMAL  Longer Claiming SMAL  Longer Claiming SMAL  Longer Claiming SMAL	registered attorner 2 registered patch 1 registered patch 1 registered patch 1 registered patch 1 registered patch 2 registered patch 3 registered patch 3 registered patch 3 registered patch 4 registered patch 5 registered patch 5 registered patch 6 registered	tion form of a Customer  PRINTED ON  Row, up assignee of this form is NO  (F  Ems Inc.  116 (will not be pr  41  7 CFR 1.27.  FFR 2.47 Publics  Ill not be accepted	ion (or "Fee Address" indicated in more recent) attached. Use  RESIDENCE DATA TO BE an assigned to identified bel 37 CFR 3.11. Completion of  EP  LI Seating Syste  assigned datagory or dategory enclosed  mail entity discount permitted Copies  (from status indicated above)  MALL ENTITY status Sec 3.  Sequencies to apply the leases	I "Fee Address" indican PlO/SB47, Rev 03-02 o Number is required.  SSIGNEE NAME AND PLEASE NOTE: Unless econdation as set forth in A) NAME Or ASSIGNE TO A SIGNE CONTROL OF THE FOLLOWING FEE (NO SIGNE FEE A) Publication Fee (No Sign
credit any overpayme opy of this form)  FR 1 27(g)(2).  mon identified above, no assignee or other pa	nee of up to no name is 3  nee is identified below, the di UNTRY)  ON Canada  orporation or other private gre iclosed.  Is to attached.  that ge the required fee(s), or (enclose an extra ci  LL ENTTY status. See 37 Cl  by paid issue fee to the applicationered attorney or agent; or the	or sgent) and the name afformers or agents if the printed or type) are patent if an assign a assignment of the patent if an assignment of the season of the	registered attorner 2 registered patch 1 registered patch 1 registered patch 1 registered patch 1 registered patch 2 registered patch 3 registered patch 3 registered patch 3 registered patch 4 registered patch 5 registered patch 5 registered patch 6 registered	tion form of a Customer  PRINTED ON  Row, up assignee of this form is NO  (F  Ems Inc.  116 (will not be pr  41  7 CFR 1.27.  FFR 2.47 Publics  Ill not be accepted	ion (or "Fee Address" Indicate in more recent) attached. Use  RESIDENCE DATA TO BE an assigner to identified belt 37 CFR 3.11. Completion of  EP  LL Seating Syste  mail entity discount permitted  Copies	I "Fee Address" indican Ploysistata, Rev 03-02 o Number is required.  SSIGNEE NAME AND DIEASE NOTE: Unless econdation as set form at A) NAME OF ASSIGNE CONTROL OF ASSIGNE For Editional States of the superpristic Fine following fec(s) are easier fee.  I publication Fee (No signature of the superpristic Fine following fec(s) are easier fee.  Advance Order - # of the superpristic fee and publication of the USPTO g. Et The Issue Fee and Puecas as shown by the reconstitution of the superpristic fee as a shown by the reconstitution.
credit any overpayme opy of this form)  FR 1 27(g)(2).	nee is identified below, the di UNTRY)  ON Canada  orporation or other private gre inclosed.  Is a stached charge the required fee(s), or (enclose an extra ci  LL ENTTY status. See 37 Cl by paid issue for to the applicationered attorney or agent; or the	or sgent) and the name afformers or agents if the printed or type) are patent if an assign a assignment of the patent if an assignment of the season of the	registered attorner 2 registered patch 1 registered patch 1 registered patch 1 registered patch 1 registered patch 2 registered patch 3 registered patch 3 registered patch 3 registered patch 4 registered patch 5 registered patch 5 registered patch 6 registered	tion form of a Customer  PRINTED ON  Low, up assigned fithis form is NO  (E)  PMS Inc.  Tes (will not be put  41)  7 CFR 1.27.  Fee and Publics till not be accepted and Traderinak	ann (or "Fee Address" Indicated the more recent) attached. Use RESIDENCE DATA TO BE an assigner to identified below the state of the Completion of the Compl	The Address indicate Ployshaft, Rev 03-02 of Namber is required.  SSIGNEE NAME AND DEASE NOTE: Unless econdation as set forth at a) NAME OF ASSIGNE COLORD SET OF THE FOREST OF THE PART OF THE PROPERTY OF THE PART OF THE PROPERTY OF THE PART OF THE
credit any overpayme opy of this form)  FR 1 27(g)(2).  Into identified above, to assignee or other pa	nee of up to no name is 3  nee is identified below, the delivery)  ON Canada  orporation or other private greationed.  Is a strached.  tharge the required fee(s), or (enclose an extra of the supplied strength of the supplied strength attorney or agent; or the supplied strength attorney	or signify and the name attention or agency of agency if a strain of type) are patent. If an assign a satisfication of type and STATE OR COMMISSING A COMMISSION AND	registered anonic 2 registered pater listed, no name with EPATENT (print data will appear on I a substante for film (i) RESIDENCE. (CI. Mi) (i) Payment of Fec(s):  A check in the a Deposit Account No.  Deposit Account No.  b Applicant is not in the film free (if any) or mi from anyone other in Office.	tion form of a Customer  PRINTED ON  PRINTED ON  E PRINTED ON  (F	an (or "Fee Address" indicated an upper recent) attached. Use  RESIDENCE DATA TO BE an assigned to identified bel 37 CFR 3.11. Completion of  EP  LI Seating Syste  assigned catagory or disegrated and the control of t	Fee Address indicate Ploysity 7, Rev 03-02 of Namber is required.  SSIGNEE NAME AND PLEASE NOTE: Unless secondation as set forth in A) NAME OF ASSIGNE COLUMN TO ASSIGNE FOR THE FORM THE PROPERTY OF THE FORM THE PROPERTY OF THE FORM THE PROPERTY OF THE PARTY STATUS (Let a Applicant claims SM Director of the USPTO in The Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the Issue For and Purch 14 allower by the Issue For and Purch 15 allower by the Issue F
credit any overpayme opy of this form)  FR 1 27(g)(2).  Into identified above, to assignee or other pa	nee of up to no name is no is identified below, the de LINTRY)  ON Canada orporation or other private gre inclosed. It is a attached charge the required fee(s), or (enclose an extra of the include an extra of the paid is see for to the application of the intered attorney or agent; or the December 20	or signify and the name attention or agency of agency if a strain of type) are patent. If an assign a satisfication of type and STATE OR COMMISSING A COMMISSION AND	registered anonic 2 registered pater listed, no name with EPATENT (print data will appear on I a substante for film (i) RESIDENCE. (CI. Mi) (i) Payment of Fec(s):  A check in the a Deposit Account No.  Deposit Account No.  b Applicant is not in the film free (if any) or mi from anyone other in Office.	tion form of a Customer  PRINTED ON  PRINTED ON  E PRINTED ON  (F	ann (or "Fee Address" indicated upon recent) attached. Use RESIDENCE DATA TO BE an assigner to identified bel 37 CFR 3.11. Completion of EP.  11. Seating Systematic Systematic States of the United Systematic Catagory or esteron enclosed and the Epigenesia of the United Systematic States of the United Systematic System	Fee Address indicate Ploysity 7, Rev 03-02 of Namber is required.  SSIGNEE NAME AND PLEASE NOTE: Unless secondation as set forth in A) NAME OF ASSIGNE COLUMN TO ASSIGNE FOR THE FORM THE PROPERTY OF THE FORM THE PROPERTY OF THE FORM THE PROPERTY OF THE PARTY STATUS (Let a Applicant claims SM Director of the USPTO in The Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the reconduction of the USPTO in the Issue For and Purch 13 allower by the Issue For and Purch 14 allower by the Issue For and Purch 15 allower by the Issue F

Dec-22-05 09:36am From-MILLER THOMSON

DEC 2 9, 1005

## CERTIFICATE OF TRANSMISSION

Invention: Lever Arm With Tactile Contour

Filing Date: December 17, 2003

Application No.: 10/736,626

Inventor: Terrence Joseph Cassaday

Country: United States

Examiner: Rodney Barnett White

Art Unit: 3636

Due Date:

March 1, 2005

Oates

Subject: Part B - Fee Transmittal form in duplicate (totalling 3 pages

including this certificate page)

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office Fax No. 571.273.2885 on December 22, 2005.

Debbie Oates

Printed name of person signing this certificate

Signature